

Middle East Respiratory Syndrome Coronavirus Seropositivity in Camel Handlers and Their Families, Pakistan

Appendix

Virus and Cells

The EMC/2012 strain of MERS-CoV was provided by Bart Haagmans and Ron Fouchier (Erasmus Medical Center, Rotterdam, the Netherlands). We conducted all work with infectious MERS-CoV in the University of Iowa Biosafety Level 3 (BSL3) Laboratory.

MERS-CoV ELISA

We performed ELISAs, which use the S1 protein as target, as described previously (11), using commercially available kits (Euroimmun Medizinische Labordiagnostika AG; <https://www.euroimmun.com>) and read them as positive (>1.1), negative (<0.8), or borderline ($0.8-1.1$).

We performed MERS-CoV IFA, which uses MERS-CoV infected cells, as previously described (11). We considered titers $<1:10$ negative.

Plaque Reduction Neutralization Assays (PRNT₅₀)

We performed PRNT₅₀ assays as previously described (11). We repeated assays for PRNT₅₀ ≥ 2 times for each serum sample, with nearly identical results. We considered serum samples with PRNT₅₀ $>1:20$ positive.

Statistical Analysis

Fisher exact test was used to compare differences between groups. We considered p values <0.05 statistically significant.